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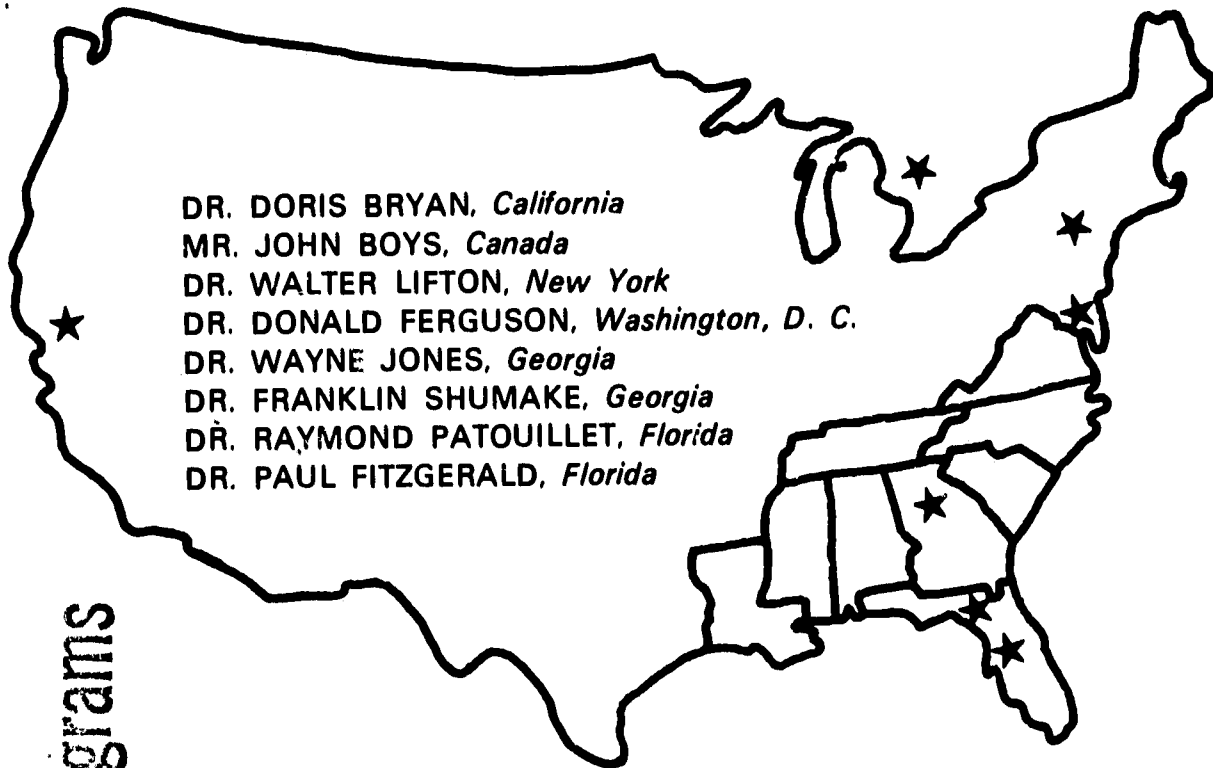
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ABSTRACT

THE PUPIL PERSONNEL SERVICES (PPS) DEMONSTRATION CENTER IN CONYERS, GEORGIA, HELD A SEMINAR WHICH BROUGHT TOGETHER PUBLIC SCHOOL PERSONNEL AND COLLEGE PERSONNEL IN THE AREAS OF COUNSELING, PSYCHOLOGY, SOCIAL WORK, AND HEALTH. DR. FRANKLIN SHUMAKE DISCUSSED PPS, PROGRAMS, PROBLEMS, AND PREDICTIONS. INCLUDED IS A DESCRIPTION OF THE ROCKDALE COUNTY MODEL. "DEVELOPING SERVICES FOR FACILITATING INSTRUCTION," BY DR. RALPH E. BAILEY GIVES A BRIEF DISCUSSION OF ACTIVITIES AND PROGRAMS OF THE ROCKDALE COUNTY CENTER. MRS. SANDRA R. DAHL DESCRIBES "REFERRAL PROCEDURES AND COUNSELING SERVICES" AT THE CENTER. "PARENTAL INVOLVEMENT" IS DISCUSSED BY MISS BARBARA BROWN. OTHER TOPICS COVERED ARE: (1) "PROGRAM COORDINATION;" (2) "LONG-TERM SERVICE TO STUDENTS;" (3) "THE SCHOOL PHYSICIAN'S VIEWPOINT;" (4) "DEMONSTRATION AND DISSEMINATION;" (5) "INITIATIVE IN SCHOOL SOCIAL WORK;" (6) "SCHOOL PSYCHOLOGY-A FOCUS ON INTERVENTION AND DIRECTIONS IN THE ELEMENTARY SCHOOL," (7) "SCHOOL HEALTH TRENDS;" AND (8) "NEW DIMENSIONS IN PUPIL PERSONNEL SERVICES." THE RESEARCH REPORTED HEREIN WAS FUNDED UNDER TITLE III OF THE ELEMENTARY AND SECONDARY EDUCATION ACT. (KJ)

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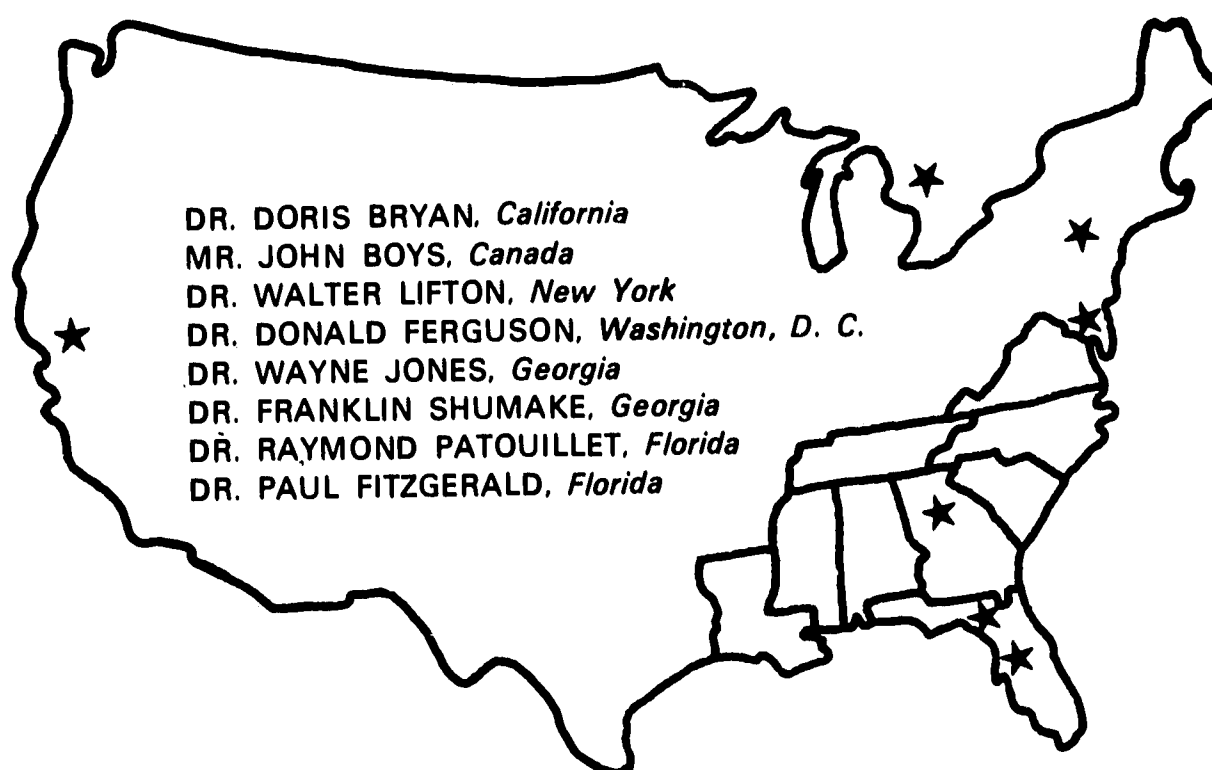
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FOREWORD

One of the fundamental purposes of the Pupil Personnel Services Demonstration Center is to disseminate information to school systems which encourages the development of pupil personnel programs throughout Georgia, the Southeast, and the United States.

A seminar which was held in April, 1969, in Conyers, Georgia, was designed specifically to bring together public school personnel and college personnel in the areas of counseling, psychology, social work, and health. There were representatives from nine southern states and Washington, D. C.

The major program participants came from Oakland, California; Atlanta, Georgia; Rochester, New York; Silver Spring, Maryland; Tallahassee, Florida; and Tampa, Florida. In addition to the program participants from out of state, the professional staff of the Rockdale County Pupil Personnel Services Demonstration Center participated on the program. Their speeches are included as a part of these proceedings.

It was our intent to bring together a good combination of theoretical and practical approaches to the growth, development, and concept of pupil personnel services. Hopefully, we have been able to bring together some of the best and most current thinking in America relative to the problems, the programs, and the trends of pupil personnel services in the public school systems of America.

Copies of these proceedings are available upon request from the Pupil Personnel Services Center, Rockdale County Public Schools, Conyers, Georgia 30207.

Pupil Personnel Services —

Programs, Problems,

Predictions

DR. FRANKLIN SHUMAKE

DIRECTOR

Pupil Personnel Services Demonstration Center

I. PUPIL PERSONNEL PROBLEMS

As we attempt to develop pupil personnel programs throughout the United States, we face many diverse problems. The promotion of the pupil personnel concept, however, is of significant importance if public education is to adequately educate students for our society. Four major problem areas will be related here.

1. *Diversity of background for pupil personnel specialists.* The very nature of pupil personnel specialties indicates that we are attempting to bring together the five areas of specialty which have operated independently of each other in many ways. While the specialists have sometimes worked together on the job effectively, they have been recruited, educated, and employed independently of one another. The specialists in the fields of psychology, social work, counseling, and health hold membership in separate professional associations which have on occasions even considered one another as competitors.

There has been diversity within each area of specialty as well as among the groups. For example, in the profession of school psychology, there has been a great deal of conflict relating to degree requirements and levels of training in distinguishing among psychometry, psychology, school psychology, and the clinician. Does school psychology belong to the family of the American Psychological Association, or should school psychology build its own association within the educational framework? A look into each of the areas of health, social work, and counseling would give evidence of similar conflicts within each specialty.

2. *Professional acceptance of other educators.* A fundamental problem in advancing pupil personnel programs is whether or not a specialist can be accepted by administrators and teachers. It becomes one of our major responsibilities to implement a program

of special services which is interpreted as a help rather than a threat. We must be able to move from the concept of one teacher, one classroom, and one group of students to the concept of differentiated staffing and team participation. This is not an easy challenge for a profession as traditional as education.

3. *Crystallization of purpose.* What is the purpose of a pupil personnel program in a school system? Are our goals identical with the instructional goals of a school system? Are we going to operate clinics? Are we going to service the normal developmental needs of students? Are we going to specialize in problem students? Are our specialists going to work "with" teachers, "for" teachers, or "under" teachers? Will each area of pupil personnel specialty be able to agree as to purpose and programs?

4. *Need for a model program.* In order to address ourselves to the previous three problem areas, it is going to be necessary for us to develop models of pupil personnel programs throughout the United States. We must have extensive first-hand experiences under favorable conditions as we attempt to bring together diverse backgrounds, as we learn to achieve professional acceptance, and as we crystallize our purposes.

It was this line of thinking which motivated the Georgia State Department of Education to work with a local school system in requesting a demonstration center under the funding of Title III of the Elementary and Secondary Education Act.

The remaining remarks of this paper will relate to the pupil personnel model in Rockdale County; the experiences we have had with the program; and the ideas which we have developed within the program.

II. THE ROCKDALE COUNTY MODEL

The Rockdale County School System enrolls 4,500 students. It has traditionally been a rural community but is becoming suburbanized due to its nearness to the Metropolitan Atlanta area. There are four elementary school attendance zones for grades 1 through 6. There is one junior high school for grades 7 and 8, and there is one high school for grades 9 through 12. There is a 26 percent Negro population and approximately 28 percent of the school population has been defined as economically deprived. There is healthy industrial growth, and the population growth is primarily of average and above family income level. The attitude of the community toward education is positive and progressive, and the school system taxes heavily to operate its enrichment program.

The Pupil Personnel Services program in the Rockdale County School System is reported to you as a model for pupil personnel services. We are very careful to say that it is not *the* model for pupil personnel services. As I have observed pupil personnel programs in various parts of the country, I have been impressed with the fact that we are wise to have varying approaches as we develop pupil personnel programs.

Our approaches must take into consideration the population,

the problems, the personnel, and numerous other factors. The pupil personnel program at Rockdale County was begun two years ago, and it was intended to demonstrate four major aspects:

1. Facility
2. Equipment
3. Personnel
4. Program

FACILITY. A special office building called the Pupil Personnel Center was constructed to house the program. It was constructed at a cost of \$125,000. The facility was designed totally by pupil personnel specialists and designed specifically to meet the needs of pupil personnel services.

In addition to regular office space for each specialist, the facility has a well-equipped play media room, a group counseling room, a reading room, clerical space independent of the counseling area, a special records room, and a lobby designed for learning while a parent or student waits.

EQUIPMENT. In addition to routine equipment of a business nature, two installations were chosen to be especially useful in the conducting of pupil personnel services: (1) a closed circuit TV and video tape system, and (2) a central dictation system. Each professional office is equipped with permanently installed camera and microphone facilities which can be controlled from one central location in the building, thus allowing the closed circuit video facilities to be used without involving either the professional staff member or the client in the stopping or starting of the equipment.

The centralized dictation system is designed to feed all dictation into one clerical position. Such a system allows for very efficient reporting of what is done by the professional staff and allows for efficient filing of the material. It has proved especially efficient when two or more staff members are working on the same referral and are constantly adding data.

PERSONNEL. The personnel in the Pupil Personnel Services Center includes a School Psychologist, School Social Worker, School Nurse, Psychometrist, Elementary Counseling Specialist, Secondary Counseling Specialist, and a Director of Pupil Personnel Services.

PROGRAM. The primary effort of the Pupil Personnel Center has been to design and conduct a program of services which would become a part of the local school system. It has been the basic philosophy of our program that pupil personnel services must be an integral part of the instructional program and must actively support and stimulate the improvement of the instructional program.

Thus, we have tried to build a model facility, equip it adequately, and staff it with the appropriate personnel in order that we could demonstrate how these specialists can work cooperatively with other teachers and administrators in the building of an instructional program that more adequately meets the needs of a broader range of students.

III. PUPIL PERSONNEL TEAM

Perhaps our most significant contribution to the growing concept of pupil personnel services will be our utilization of the various specialists as a pupil personnel team. As I have observed other programs in various school systems, it has been my judgment that to a very great extent there are specialists operating independently within their own area of speciality, and on certain occasions they meet together or call upon one another when needed.

Several things have contributed to us effectively developing a team within our program in Rockdale County. In the first instance, the centralized location in a center which houses all specialists has contributed greatly to this team development. However, the process which has proved most useful has been very frequent and regularly scheduled staff meetings.

Staff meetings are scheduled twice each week; and when the meetings are planned, we distinguish between *administrative* and *professional* business. For example, the Monday morning staff meeting is for business and administrative matters. The Director of Pupil Personnel Services is present and presides at this staff meeting. It is at this point that discussions are made concerning our internal operations, our relationships with the various schools within the system, and the scheduling of our time for community activities.

The Friday staff meeting is an opportunity to discuss students who have been referred to the Center. The Director is usually not present at the staffing, and it is presided over by the in-take counselor (the Elementary Counseling Specialist) who presents any new referrals where judgments need to be made as to their assignment. Each staff member in turn presents cases on which he is working that need the discussion and thought of other members.

CHARACTERISTICS OF PUPIL PERSONNEL TEAM

The centralized location, the frequent staff meetings, and the constant communication among the staff members have made a strong pupil personnel team possible. A summary of the characteristics of the pupil personnel team includes:

1. Referrals are made to the Center rather than to a specialist, so the diagnostic decision is a professional one.
2. The team approach means that all staff members have some awareness of all major cases being carried within the Center.
3. The central location aids the centralizing of records and activities to avoid duplication of effort by staff members when they may be unaware of activities.
4. Parents and teachers have one point of inquiry to look for help, rather than having to depend upon uncoordinated services from many directions.
5. The team approach provides the opportunity for staff

members to take the initiative to be involved in all cases; consequently, a staff member can give information and direction to another staff member who may not know to ask for it.

6. The team approach provides the opportunity to deal with the total environment of the child, with the specialists integrating their efforts to meet the total needs of the child.

7. The team approach has direct influence and impact on the philosophy of the school system. Teachers, counselors, and principals begin to think of the child's total educational environment.

8. Staff members have a constantly broadening effect on each other and thereby increase the competencies and skills of each.

9. The team of specialists have regular formalized team staffing of cases.

10. The central setting offers opportunities for constant and immediate communication and consultation with other staff members.

IV. PUPIL PERSONNEL AND THE INSTRUCTIONAL PROGRAM

It is the purpose of pupil personnel services to stimulate, support, guide, and assist in evaluating the instructional program. As we look at our program in Rockdale County, we probably have had our most notable success in the impact which we have had on the instructional program. While a great deal of time is spent in personal counseling with students as indicated in the previous point, much time also is consumed working throughout the school system in such activities as will be mentioned at this time. As our part in the instructional program, we have primary responsibility in the following areas:

A STATUS STUDY OF THE SCHOOL SYSTEM. Very early in our program, we conducted for the Board of Education and the Superintendent a thorough study of the current status of the school program, including pupil personnel services, curriculum, administration, facilities, policies, etc. As a result of this comprehensive study, we arrived at some 30 recommendations to the Superintendent and the Board of Education. Among these recommendations were suggestions for the pupil personnel program. But the recommendations covered every phase of the school program. The Board acted constructively on many of the recommendations.

PRE-SCHOOL ASSESSMENT. The Pupil Personnel Services Center has initiated with each elementary school a systemwide program of pre-school assessment. This assessment is held for several weeks in the summer prior to first grade enrollment in the fall. The assessment is very thorough, including the gathering of data about the child's academic, social, and physical readiness for learning.

The School Nurse conducts dental, vision, and hearing screenings. The Psychologist and Social Worker meet with the parents of the pre-schoolers in discussions of helping the first grade child. Standardized readiness tests are given, but additional questionnaires have been constructed for the acquiring of information which would be useful in assessing the students. Follow-up reports are sent home to the parents indicating a judgment concerning the readiness of the children. The teachers receive an individual report for each student. Parents are requested to meet with staff members in discussing the readiness or lack of readiness of their students and are given suggestions for assisting them.

TESTING PROGRAM. The Center initiated a systemwide testing program which involved assessment of ability and achievement of every student in all grades throughout the school system. The most modern use was made of the data by purchasing data processing services. These data were fed back to each individual teacher in terms of the students she teaches, and the data were grouped for systemwide trends. The data then were turned over to the Curriculum Director for use in subject matter in-service with teachers throughout the school system.

DESEGREGATION IN-SERVICE. At the initiative of the pupil personnel staff, a project was written and approved which resulted in an eight-month program of in-service meetings designed to assist teachers and administrators in gaining a better understanding of a wide range of student needs. As a result of these in-service meetings, recommendations have been drawn up by the teachers and administrators which will revise the grading, reporting, grouping, and organizational structure of the school system.

ELEMENTARY GUIDANCE IN THE SCHOOLS. As a result of the pupil personnel program, the school system has employed an elementary counselor in each of the elementary schools. This person acts as the residential pupil personnel specialist. The counselor works directly in the school with the faculty, parents, and students of that school. However, in addition to these local responsibilities, the counselor is a very convenient facilitator for the services of pupil personnel which are provided outside the school system.

PARENT STUDY GROUPS. Members of the pupil personnel staff, in conjunction with local school counselors, have begun discussions with parents in such subjects as *study skill habits* and *sex education*. The interest of the parents in these topics has been such to convince us that we can provide a great deal of positive information to the public through such groups.

PUPIL PERSONNEL ASSISTANTS. As a result of the pre-school assessment program, it became obvious that we had a high number of students who needed individual attention of the type which a classroom teacher does not have time to provide in a normal classroom setting. Pupil personnel assistants, para-professionals with a minimum of a high school education and in some instances a college education, were assigned to first grade teachers. They had the rather specific assignment of working with those indivi-

duals in the first grade who were isolating themselves by non-participation.

The pupil personnel assistant has differed from the typical teacher aide in that we have not attempted to use these assistants for the routine clerical-type responsibilities. The assistants have met weekly with the School Social Worker in an attempt to provide them constant opportunities to become more sensitive to the human and emotional needs of students. The assistants have worked under the direct supervision of classroom teachers; however, the pupil personnel specialists have been available to them in order to emphasize constantly the importance of meeting the emotional needs of the students.

TEACHER SEMINAR TOPICS. At the beginning of the past school year, we circulated some 50 or 60 possible topics of interest to teachers. The teachers indicated their priority of interest, and 12 seminars were scheduled — each one conducted by a member of the pupil personnel team. Attendance was voluntary, and the topics resulted from popular choice. The teachers met weekly for three months with the opportunity to talk and to participate in gaining additional information in fulfilling their responsibility as teachers.

Again, it is our judgment that the above and other activities have resulted in our pupil personnel team having a very direct and constructive impact on the total movement of the instructional program in the Rockdale County School System, thus, fulfilling the basic philosophical purpose of a pupil personnel program.

V. PUPIL PERSONNEL ROLES

One of the most interesting experiences which we have had in our project has been our efforts to arrive at a *role and function definition* for the various pupil personnel specialists. Quite frankly, I entered into this program with some very firm opinions about the roles of each specialist. It had been rather easy and natural and very convenient to categorize all services provided by the various specialists as being functions which were either *unique* to a particular specialist or *common* to two or more of the specialists.

In the beginning, the list of *unique* functions for each specialist would have been unusually long, and there would have been a few functions which would have been considered *common* to several of the specialists. Today, my list has changed entirely. We have come to see that the specialists, even though trained in several disciplines, are much more alike than different in skills, competencies, and attitudes.

Many observers who visit with our team members are sometimes frustrated by the fact that we have not maintained the rigid roles so often defined in textbook descriptions of the various specialists. Let me be very careful to point out, however, that there are certain skills and competencies that remain very unique to the various specialists; and each other member of the team

finds it necessary from time to time to look to another specialist for help in a specific area. However, we as a profession would probably be wise to concentrate heavily in the future on making mutual use of the attitudes and competencies which we have in common.

I would suggest that the educators of pupil personnel specialists be especially careful that each specialist is taught to function as a part of a pupil personnel team. It is when a specialist is trained as though he were to operate in isolation that we produce the rigid personality which then finds it hard to share and to learn with other team members. The flexibility which we urge upon teachers and administrators also must be absorbed and become a part of our own personalities.

VI. PUPIL PERSONNEL TRENDS

The following comments are an effort to summarize trends which we have noticed during our operation, as well as suggested directions which should be followed as we project our services into the future.

1. An effort should be made to provide special services such as those practiced by pupil personnel specialists as a regular and normal part of the public school program. Too often in the past, we have made something unusual or even bizarre about psychological testing, health examinations, screening processes, or specialized counseling.

2. The public school system is going to make a more intensive effort to provide treatment or remediation services as well as diagnostic services. For too long, there has been a tendency on the part of the public school system to diagnose a problem and then to refer it to some outside agency for remediation.

3. Paid para-professionals and volunteers are going to be necessary to meet the future demands for special services. There are many areas of skills which can be performed adequately by well-trained para-professionals. It will be necessary for us to distinguish clearly between typical teacher aides and the more specialized services which we need from pupil personnel assistants.

4. The services which we provide to students must be flexible in reality, not just on paper. We constantly insist that teachers approach students in a very flexible way; however, we often times continue to assess all students alike with the same techniques. We continue to make recommendations that are too similar in nature for the diversity of students with whom we work.

5. We have at least two primary jobs in our efforts to sell pupil personnel services. In the first instance, we must be sure to do an effective job with parents and students; and secondly, we must find ways to show success as a result of our efforts.

6. We need to begin to think more in terms of rendering full services to students and parents from birth to death. This philosophy is being reflected by many of the programs authorized by Congress; however, many of us as specialists have not yet attempted to grasp the full significance of the contribution which

we must make to offering full services. It is going to become our task to do whatever must be done for students, in order for them to learn effectively and to benefit maximumly from the instructional program.

7. We are going to have to drastically rethink our concept of specialist-student ratios. The ratios we arrived at as individual areas of speciality may vary when a full team is present and when we can make effective and constructive use of para-professionals.

8. Satellite centers of pupil personnel specialists may prove to be extremely helpful to us in the future. Under this concept, a team of specialists might be available to each high school and the feeder elementary schools which make up its attendance area.

9. The education of the various pupil personnel specialists will come to have a great deal of common courses and methods of training. This probably will take place in spite of the protesting of well-built departments of speciality within colleges and universities. This concept would not destroy traditional department lines, but it would tend to strengthen instruction within each of them as the varying departments attempt to educate pupil personnel specialists who will function on a team.

10. The long-term success of pupil personnel programs will be dependent upon how well the pupil personnel specialists are accepted by other members of the professional team. Our efforts must complement, not threaten, administrators and teachers. The other professionals must see us as an extension of their efforts rather than a replacement of them in the services they are providing.

Developing Services for Facilitating Instruction

DR. RALPH E. BAILEY

ASSOCIATE DIRECTOR

Pupil Personnel Services Demonstration Center

One of the major objectives of our Pupil Personnel Services Center program has been to implement activities which are facilitative of the instruction function. In providing direct services to pupils, an effort is made to help the child overcome obstacles and to resolve discontinuities which may be inhibiting him from optimally benefiting from his learning experiences. Also, direct services to students assist them to perceive personal meaning in learning activities which enhance their academic performance.

Various indirect services also are provided for facilitating the instruction function; some of which I would like to discuss with you at this time. One of the most important activities of the pupil personnel specialists has been to serve as consultants to teachers and principals. Crisis consultation focusing upon specific students has been one of the most frequent consultation contacts with school personnel.

Teachers and principals often are motivated to seek consultation with reference to those students about whom they are concerned. Typically, these students also have been referred for direct services. These consultative relationships are collaborative in nature and are established to facilitate a more complete understanding of the pupil and to consider alternative approaches for helping him. Although this form of consultation maintains a crisis focus, a secondary gain of this process is attained. This gain is the educational experience received by the consultee which may enhance his professional effectiveness to more adequately understand and assist pupils with similar problems.

Voluntary in-service seminars were established on a weekly basis throughout one-half of the school year to provide consultative assistance to groups of teachers. These seminars were task-oriented and focused upon topics selected by the teachers.

Some of the concerns explored in these seminars were related to such topics as: *What Motivates Students?*, *Games Students Play*, and *Specific Learning Disabilities: Identification and Remediation*.

A coordinated, countywide testing program was established in order to provide appraisal data on pupils which could facilitate instruction. In addition to reporting scores in traditional ways, through electronic data processing procedures, individual right response records were obtained for each pupil tested for achievement. This individual report has provided the teacher with diagnostic information about a pupil's strengths and weaknesses with reference to specific concept and skill development. Teachers have been able to use this diagnostic data for individualizing instruction. Summaries of the right response records also have been provided for evaluating group strengths and weaknesses in specific concept and skill development areas which have contributed to a more effective evaluation of curriculum.

Related to the development of a coordinated testing program has been the establishment of a pre-school assessment program. This program has been effective in evaluating the physical, social, emotional, and academic readiness of children prior to their entry into first grade. This information has been valuable to first grade teachers in individualizing learning experiences for pupils. This program also has been successful in stimulating parental involvement in school activities and in helping parents acquire techniques through which they are able to enhance the educational progress of their children.

I would like to highlight one additional program established to facilitate instruction, which was initiated to meet the needs of entering first grade students. It was decided to employ pupil personnel assistants, working under the guidance of first grade teachers, whose primary objective would be to establish helping relationships with pupils who had been identified in the pre-school assessment program as children needing follow-up.

These para-professional workers implement the recommendations of teachers through working with pupils individually and in small groups. They provide tutorial assistance to pupils through a supportive relationship which maximizes the encouragement process. A two week pre-service workshop was held prior to placing the pupil personnel assistants in the school and they have met weekly with the School Social Worker who coordinates their activities. These assistants are assigned no clerical responsibilities. Rather, their focus is upon creating personalized learning experiences for pupils.

The activities and programs which I have shared with you are representative of the varied approaches in which pupil personnel services have attempted to facilitate instruction within the Rockdale County School System.

Referral Procedures

and

Counseling Services

MRS. SANDRA R. DAHL

ELEMENTARY COUNSELING SPECIALIST
Pupil Personnel Services Demonstration Center

In the schools and in the Center, our pupil services have two complementary purposes. First, we are concerned with activities to enhance the normal development of all students. Second, we are concerned with the establishment of a well-articulated program to take care of the continual need for individual crisis intervention and longer-term, more intensive attention to some students.

Referrals normally come to the Center through the school counselor, on a two-page *Request for Pupil Personnel Services* which is signed by both the principal and the counselor. Occasionally parents contact the Center directly, and their requests for help are referred to me. If a parent has contacted us without being aware of the existence of counseling services in the schools, I simply refer the parent to the counselor. If the parent already has been in contact with the child's counselor, I accept this request for Center services, and the counselor completes the usual referral form.

Parents are apprised routinely of their child's referral to the Center. But their permission is not requested, because our attitude is that pupil personnel services should be regarded casually, as an unexceptional part of the educative process.

Typically, the counselor has been working with the student, parent and teacher for a period of time before the referral is made. This referral decision does not imply that the counselor feels unable to cope with the case and is therefore getting rid of it! It does mean that the school has identified a need for special services available through the Center; and, in most instances, primary responsibility for the case will be transferred from the counselor to one of the specialists on the team.

The intake process is related closely to the Center's responsi-

bility for counselor coordination, which Mrs. Jane Wallis will describe later. The discussion which the counselors, Dr. Ralph Bailey and I carry on during our meetings for program planning and in-service study influence the types of cases which will be referred to the Center. Counselors and teachers also have been provided an informal outline entitled *Deciding Whom to Refer*. No requests for Center services are turned down.

When a formal *Request for Pupil Personnel Services* is received at the Center, I mark it with a stamp which later will provide an instant record of the date of receipt, the date of assignment to a specialist, the date of initial interview, and the date of termination. Immediately, I record the new referral in a looseleaf notebook and send a written acknowledgement of receipt to the child's teacher, informing the teacher that *Notice of Case Assignment* is attached or will follow within a week.

If the case appears to be an uncomplicated one, such as a need for intellectual evaluation or a request for the School Nurse to check out a medical symptom — or if it appears to be a serious case requiring immediate attention — it will be assigned to the most appropriate specialist right away. Otherwise, I will hold the referral until the next Monday morning, when it will be presented to the team for preliminary staffing.

The school counselors are taking turns attending these weekly sessions, so each counselor will attend one staffing per month. At the time of staffing, hypotheses are generated; strategies are suggested; and case assignments emerge from a pooling, probing and sharing of ideas among the five disciplines represented.

After the discussions of new cases, we staff on-going cases which seem to be plateaued, perhaps in need of transfer to another member of the team, or which would provide an enriching learning experience for the team.

Each specialist maintains primary responsibility for his own cases, and not all cases follow the same path after assignment. After preliminary staffing, the specialist uses his judgment concerning procedure. In some cases, a parent interview will be the first step; or a teacher interview; or an interview with the student, either verbally or in association with play media.

Sometimes another member of the team will be asked to take part in assessment of the situation (for example, by conducting a health examination, by administering psychological tests, or by observing the child). Supplemental observations might be made directly, or by going over a videotape.

Sometimes another team member will be asked to take part in the counseling of a student and his parents, even to the extent of making joint home visits, if it seems this extra activity is needed to gain a more valid understanding. Sometimes male and female members of the team will function as a sub-team, sharing a case or a group in order to define a problem more clearly. Dr. Barney Brewton will elaborate upon the counseling aspect of our services.

Sooner or later, each case will be terminated. At that time, the specialist responsible for the case will send a *Final Report* to the school, and the file will be flagged for automatic follow-up after two months. The school counselor may send in a *Request for Reactivation* at any time.

Before I finish this brief outline of our referral and counseling services, I want to focus again upon the team:

In the process of working through our staffings of new and on-going cases, all of the specialists have become aware of the major referrals and have come to feel a certain responsibility for the successful completion of every one. We have become aware of trends in characteristics of referrals, thereby gaining a unique perspective of the school system, its strengths and its weaknesses.

Our individual skills continue to be sharpened and expanded by regular, planned exposure to the training of members of other professions. We continue to struggle — within ourselves and with each other — to compare, to challenge, to defend, and to clarify professional role definitions.

The whole has become not only greater than, but qualitatively different from, the sum of its parts. In our team, I see the characteristics of a system — not a closed system, but an open system in which communications among members continually effect changes in the team. If one were to analyze the process, cybernetic principles would probably be the most fruitful for discovering patterns and meanings in our experience of *being and becoming*.

Parental Involvement

MISS BARBARA BROWN

SCHOOL SOCIAL WORKER
Pupil Personnel Services Demonstration Center

In seeking parental involvement, the Demonstration Center's initial objective was to inform parents of its services. To do this, we addressed PTA groups and elicited the support of the local newspaper to provide consistent coverage of the project's growth and activities. A *Guidance Newsletter* to inform parents of services available in the schools and on a system-wide level has been published regularly during the school year.

But informed parents are not necessarily involved parents; and to achieve our ultimate goal, it was necessary to define four target groupings of parents whom we would seek to involve in four distinct ways: (1) To the troubled parent, we have offered consultation; (2) To the disadvantaged parent, acceptance; (3) To the concerned parent, educational experiences; and (4) To the committed parent, the opportunity for service.

The Troubled Parent: Consultation

Believing that where we find troubled students, we also find troubled parents, the Center developed a program of parental consultation. Through this program, the pupil personnel specialists have sought not only to provide parents with descriptive information regarding their child, but with an opportunity to explore and assess the causative factors of this behavior.

In contrast to earlier emphasis on long and detailed social and medical histories prior to diagnostic assessment, we adopted the philosophy that a hypothesis can be developed and tested quickly. Consultation remains child centered, but with the realization that many school problems stem from a child's reaction to his family. Let me briefly enumerate three of these areas:

1. *A student's emotional problems often stem from a stressful home environment.*

This, of course, is a broad category, for there is a wide varie-

ty of stressful situations and a wide variety of reactions to them. The majority of these situations result from serious mental or physical illness of one or both parents, marital conflict, or frequent and observed parental promiscuity. Students may react by acting out, by becoming depressed and withdrawn, by developing severe anxiety or, in the more extreme cases, by becoming schizophrenic.

In some situations, parents may be assisted in a resolution of the stress; in others, factors may be built-in to reduce the stress.

2. Student-teacher problems result from the student's transference of feeling from parent to teacher.

It is all too common that a student transfers his negative feelings and attitudes about a parent to a teacher, finds the teacher reacts accordingly, and the role relationship becomes solidified.

One of the areas in which this transference is most graphically illustrated is the discipline problems which arise from a young boy's first encounter with male teachers. In exploring these situations, it is often found that these boys have aggressive or brutal fathers whom they fear. Usually their mothers have been passive and non-threatening, often at least attempting to protect the son from his father. The boys have been able to adjust relatively satisfactorily to a female teacher, but they experience violent reactions to a male teacher who is verbally aggressive and threatens corporal punishment.

In describing this syndrome, I cannot help but be reminded of a student recently referred to the Center who had refused to be cowered by any form of physical discipline warning from his teacher. "Kick me. Cut me. Beat me. It's all been done before."

Parents of such children are not always able to alleviate the situation which precipitated the transference; but they can be apprised of their part in it, so they may act or react accordingly.

3. Academic problems resulting from a parent-child power struggle.

Academic underachievement often is precipitated, at least in part, by a parent-child power struggle. A parent or both parents in such cases becomes over-identified with the student role. Anticipating gratification through a child's success in the academic situation, the parent experiences personal failure and remorse when the student fails to achieve.

The child, in turn, enjoys a sense of power rarely known in such a consistent and dramatic way beyond the anal stage when he was able to obtain control over parental feelings through giving or withholding his feces. As long as the parent remains identified with the student role, the student's power remains.

Consultation with such parents is geared toward assisting them in separation of their identity from that of the child, entrusting him to make his own decisions about achievement or failure without being able to displace this responsibility onto his parents.

The Disadvantaged Parent: Acceptance

Though the disadvantaged parent also may be troubled, our objective with these families has been to offer acceptance rather than

consultation. In situations of extreme poverty, it has been found that long-term economic, cultural, and nutritional deprivation have so stifled ego development that the parent of the culturally deprived child, perhaps more than any other parent, feels incapable of significantly effecting his own destiny.

With this in mind, we determined to function as advocates for these parents with the school system at large, believing that until the middle class protestant ethic — which has defined the economic system as an instrument of character assessment (He who achieves is virtuous and he who fails is evil.) — is exploited, the scapegoating of low income parents cannot be eliminated.

Rather than initiate our own *war on poverty* with the commitment to effect significant changes in environment, conditions and personality, we have sought only to insure that the basic needs of these families are met. The majority of our efforts has been within the system, where we have attempted to foster not only compassion but commitments to effect changes within the schools designed to counteract or compensate for deficiencies at home.

Such practices include encouraging home visiting by teachers when parents feel insecure in the school environment, conducting seminars to facilitate understanding and communication with these parents, and experimentation with new methods of meeting needs including projects as controversial as providing baths and clean clothes at school.

The Concerned Parent: Education

The troubled parent and the disadvantaged parent come to us after the fact. We find them and work with them because a problem has occurred. But in addition to these parents whose contact has been precipitated by crisis, we have sought to reach parents who are concerned with the prevention of crisis. To these concerned parents, we have offered opportunities for continued education through seminars and discussions. Let me briefly describe two of these programs.

One was related specifically to the preparation of children for first grade and operated in conjunction with pre-school assessment. The first phase of this program was devoted to the emotional preparation of children and was conducted by the staff's School Psychologist and School Social Worker. Parental discussion groups were included as a part of the pre-school agenda and geared to the exploration of the meaning which separation has for first grade children and their parents. Films were used as a springboard for eliciting parental feelings, and parents were encouraged to communicate positive attitudes regarding the school experience and their belief in the individual ability of their six-year-old to succeed.

The second phase of this program was related to the academic preparation of children for first grade. Parents were invited to attend one of four sessions in which readiness skills were explained and discussed. As a follow-up to these meetings, a series of small-group workshops were held in which parents actively engaged in the preparation and utilization of readiness materials.

Fifteen of these sessions were conducted, with a total of 145 families participating.

Another example of our efforts to promote the active involvement of parents in the education of their children followed a similar format but was directed toward the topic of human sexuality. It was open to all parents of school age children in two of our elementary schools.

At the request of the elementary counselors in these schools, our School Physician and School Nurse gave an initial lecture on the topic, followed by a series of three small-group sessions in which parents had the opportunity to explore their attitudes and feelings regarding their own sexuality and relate these feelings to the parental responsibility of transmitting sexual information to their children.

The Committed Parent: Service

Finally, we have sought to involve the parent who has available time and sufficient interest to assist us in meeting needs which could not be met by our staff alone. We requested the assistance of the PTA leadership in fostering volunteer efforts; and with their help, we were able to recruit a number of parents to assist us during the pre-school assessment program.

Involvement of parents, however, has not been developed exclusively through school channels. With the realization that we did not have the personnel necessary to coordinate an effective volunteer program of our own, we sought to implement some services by communicating needs to existing organizations in the community.

A rather graphic example of our efforts in this area is the origin of a pre-school program for disadvantaged youngsters. A local church group is finalizing plans for such a project with our Elementary Counseling Specialist offering consultation regarding program activities and development.

In conclusion, it should be stated that we have only touched the surface in our efforts in these areas and have not yet approached a level of maximum feasible parental participation. There are many parents who willingly would become involved much more extensively than they are at the present; and at the opposite end of the continuum, there are those parents who need to become involved whom we are not yet reaching.

Given the not too surprising fact that we have not yet arrived, we do feel that we have developed a program structure which will allow us to move toward a progressively greater degree of parental involvement.

Program

Coordination

MRS. JANE S. WALLIS

SCHOOL NURSE

Pupil Personnel Services Demonstration Center

The Pupil Personnel Services Demonstration Center is an integral part of the school system and is constantly involved in program development and implementation. Recognizing that cooperative action is vital for success, the pupil personnel team considers program coordination as one of its major functions.

Although the types of programs may differ significantly, the objectives of the specialists with respect to coordination are essentially the same. After enumerating three of these objectives, I shall discuss briefly some programs and activities that relate directly to each of them. (1) To facilitate communication. (2) To encourage continual evaluation. (3) To provide opportunity for professional growth.

The Center's Social Worker coordinates a program of pupil personnel assistants. This program was developed in an attempt to deal with emotional, social, and psychological needs of first grade students in an effort to assist them in responding to first grade instruction. The pupil personnel assistants are para-professional personnel and were chosen on the basis of personal warmth and the ability to relate to people. They differ from the usual *teacher aide* in that their focus is directed toward students and their needs, rather than clerical or tutoring activities. First grade teachers and school principals were involved in all phases of development and implementation.

During the two-week orientation program planned for the assistants, first grade teachers were relieved of classroom responsibility in order to attend at least one session. In addition, teachers and principals met in small groups with the Social Worker to discuss the program. She assumes responsibility for continued coordination and in-service and consults regularly with the teachers and school administrators involved in the utilization of the pupil personnel assistants.

The Center's Nurse and Physician coordinate a program involving school health aides who assist in assessing health needs and providing health services in the schools. Since school funds were not available to employ these para-professionals, the program was developed with the cooperation of the local Office of Economic Opportunity and the Neighborhood Youth Corps Office, with funds provided by the Neighborhood Youth Corps.

Prior to beginning this activity, a number of meetings were held with school principals to discuss the value of such a program. Since its initiation, regular consultation with counselors, teachers, and principals relative to the effectiveness of the aides has been maintained by the School Nurse. School personnel also have participated in a written evaluation of the health aide program. Weekly visits to the schools in which the aides function provide time for supervision and point out needs for in-service study.

Coordinating the schools' guidance program is the responsibility of the Elementary and Secondary Counseling Specialists. Counselors are encouraged to maximize the extent to which their time, energies, and professional competencies will be directed toward meeting the objectives of the guidance program in their respective schools.

The Center's Secondary Counseling Specialist encourages the scheduling of and participates within school guidance department meetings attended by school administrators and counselors. These meetings include teachers and other Center staff at appropriate times. Regular consultation with counselors, principals, and teachers about the needs of students and the objectives of the guidance program are also a part of the coordinator's activities.

The school's four elementary counselors meet with the Elementary Counseling Specialist on a weekly basis for in-service study and program organization. In-service topics have included such things as behavior modification, learning disabilities, Adlerian Counseling, and analysis of human figure drawings.

A check list of daily activities was designed by the Center's Elementary Counseling Specialist and is utilized by each counselor in the school. These are tabulated at the end of each month and mutually discussed. This enables the counselors to evaluate their points of emphasis and to organize programs to meet more effectively the needs of schools.

Another phase of coordination involves planning with schools and outside resource people for seminar and/or workshops. For example, Dr. Manford Sonstegard from West Virginia University, West Virginia, spent one day in our system demonstrating the Adlerian Counseling rationale. Teachers, students, parents, Center staff, and visiting counselors were involved in this program which was planned and directed by the Elementary Counseling Specialist.

You have been given only sketches of program coordination, but I believe the relationship to the stated objectives is clear. While we have not achieved complete success in this aspect of our activities, we are keenly aware of its potential and have developed a framework within which we can expect to progress.

Long-Term

Service

to Students

DR. BARNEY C. BREWTON

SCHOOL PSYCHOLOGIST

Pupil Personnel Services Demonstration Center

A considerable portion of the students who are referred to the Pupil Personnel Services Center are seen for long-term treatment. By long-term treatment, I am referring to service which extends beyond approximately eight interviews. The several pupil personnel specialists differ in the absolute numbers of students as well as in the percentages of their case loads which are seen on a long-term basis. They also differ in their approaches to treatment, each utilizing approaches which are consistent with his professional training and theoretical orientation to remediation.

The School Psychologist and the School Social Worker spend a greater proportion of their time with long-term treatment than do the Elementary and Secondary Counseling Specialists. But all of the specialists are involved with long-term cases. Long-term treatment involves direct interviews with children as well as conferences with parents, teachers, and administrators. The degree and nature of involvement with parents vary among specialists, though all agree that the child's problems should be kept in focus in working with parents. Parents who require extensive psychological treatment are referred to other resources for this.

Because there are counselors in each of the schools in the Rockdale County School System, many of the students whose needs can be met through short-term counseling are seen by them. The counselors tend to refer students who need more extensive help than they can provide and students whose needs are unclear to them. With the latter group, specialists on the Center staff first study their cases and then consult with the school-based counselors concerning the disposition or treatment program. Some of the cases are referred back to the school counselors; others are handled by Center staff as short-term cases; and still others become long-term cases.

All of the specialists make a practice of conferring with the teachers of students who are being seen for treatment. These teacher contacts may be arranged and coordinated by the school counselor or the specialist may simply stop by the classroom to visit with the teacher. Consultation with the school counselor and with the school principal is a regular practice of the Center specialists. Contacts with counselors may occur at their initiation or by initiation of the Center specialist. These contacts are frequent, and the Center's close working relationship with the counselors makes it possible for the contacts to be informal and spontaneous.

Miss Barbara Brown, the School Social Worker, is currently seeing 12 or 13 children on a weekly basis at the Center for counseling. These are long-term cases. These children are evenly distributed among the elementary and secondary grades. The younger children are often seen in the Playroom; both verbal and play media are utilized in communicating with the children. Miss Brown places considerable emphasis upon the relationship between herself and the children, and views the relationship as providing a medium in which the child's feelings of selfworth can grow.

At the same time, she focuses on the objective, adjustment difficulties which the child is experiencing, and supports his efforts to deal constructively with these problems. Miss Brown terminates a case as the child seems sufficiently improved to cope without her assistance.

Miss Brown maintains contact with the parents of children who are in treatment with her. Most of these parents are seen every two or three weeks. During consultations with the parents, she shares with them the understanding which she has gained of their child's difficulties and assists them in utilizing this knowledge in relating with and making decisions concerning their children. Miss Brown does not involve herself on a treatment basis with the parents; and when parents seem too severely disturbed to utilize her assistance concerning the children, the focus then is placed upon the child. She also consults with the teachers of children who are in treatment with her and confers with the school counselor and principal.

Dr. Ralph Bailey, Secondary Counseling Specialist and Associate Director of the Pupil Personnel Center, currently is working with a group of seventh and eighth grade boys who range in age from 13 to 16. This group, which originally contained seven members, is composed of "acting out" adolescent boys who were having difficulty in developing positive relationships with their teachers or principal. Most of them also were having attendance problems and were low achievers. This group has been meeting for five months on a weekly or bi-weekly schedule. The time of the meeting is varied from one week to the next so as to minimize loss of time from a single class.

In this group, Dr. Bailey has encouraged the students to discuss and work through feelings of hostility and resentment toward

adult authority figures, particularly focusing upon inner-personal relationship difficulties with school authorities. Comparisons of feelings among members of the group have occurred. He has found through teacher reports that the students have improved in attendance and achievement and are having fewer conflicts with teachers and principals. The focus of attention in this group has been on a conscious, problem-solving level. Dr. Bailey also has seen some students individually on a regular weekly basis for counseling.

Mrs. Sandra Dahl, the Elementary Counseling Specialist, estimates that a third of the children for whom she accepts responsibility become involved with her on a long-term basis. She employs play media and verbal communication with the children, varying the use of play and verbalizing with the age and needs of an individual child. Mrs. Dahl sees some children in pairs for play therapy. She finds that some children are able to utilize their time more effectively when another child is with them.

Mrs. Dahl sets rather specific goals with many of the children with whom she works. For instance, with one eight year old she is attempting to alter her habitual way of coping with stress through pouting and withdrawal. With another child, she is particularly concerned with his attitudes toward women and is attempting through her therapeutic interactions with him to alter his expectations of women. Mrs. Dahl presently is evaluating several early adolescent boys for inclusion in group counseling as she believes that they need the peer dimension in their treatment program. Individual counseling alone has not seemed adequate for these boys' needs.

She confers frequently with teachers of the children with whom she is working and with the counselor and principal of their school. Mrs. Dahl also makes community contacts in the interest of children when these are needed. Contact is made with the parents of the children who are in treatment, and they are helped through consultations to relate with and cope with their children more effectively.

As the Center's School Psychologist, I am currently seeing nine children for treatment. One high school student is being seen on a weekly basis for counseling. The other students are in the early and middle elementary grades. With the young children, verbal and play media are utilized in the treatment process. The children are given the opportunity and are encouraged to express and work through unconscious conflicts with play materials. Considerable emphasis is placed upon the relationship between the child and the therapist; and the child is encouraged to become increasingly trusting, free, and intimate in the relationship.

I attempt to schedule appointments with all of the parents of children whom I have seen, but in most cases I do not make the parents' participation a condition for seeing the child. Consequently, work with the parents ranges from no contacts in some cases to intensive work in other cases.

In one case where a child's problems were very intimately related to parental rejection, the parent was seen on a regular weekly basis for therapy to work through these feelings toward her child. In other cases, the mother and father have been involved in regular consultations with me, but the focus tended to remain close to the parents' involvement with the child.

Conferences with teachers and counselors of children being seen are scheduled as they are needed. In at least one case, periodic conferences with the teachers, counselor, and principal of a student were seen as the major therapeutic medium of the treatment process.

The School

Physician's

Viewpoint

DR. CHARLES P. BROOKS

SCHOOL PHYSICIAN

Pupil Personnel Services Demonstration Center

Since the Pupil Personnel Services Center operates in a school system, one might view it as a public health type of project. On the contrary, I have found my activities as the project's School Physician to be more like my own medical practice here in Rockdale County. The chief difference is that I do not prescribe for the student.

The ultimate aim of any physician is to help the child, not only physically but also to guide him in compensating for any handicaps. By aiding him in this manner, the student is more likely to develop into an asset to his community. I believe the school physician is in the position to become even more aware of this goal.

Living in this county for ten years, one gets to know most of the people, especially if there are problems in the family. The child who is always out of class on Monday may not wish to tell his teacher that his father was drunk again over Saturday and Sunday, and kept the entire family up all night fighting "little men" coming in the windows. But ask any of the three physicians in this county; we can tell you why the little fellow is always out of class on Monday.

Because of this close relationship with the community, I have an advantage that physicians in larger counties perhaps would not have. Textbooks for school physicians, therefore, cannot serve as strong guidelines in the everyday practice at this level.

Furthermore, because this is my community, I am not proud of the stigma of an extremely high rate of "dropouts". I would like to contribute something to determine the cause and a means to correct it.

As the School Physician in the Demonstration Center, I have tried to contribute more than solutions to existing health problems.

For example:

(1) I have tried to know my community. What type of drinking water is used in various areas? What are the road conditions? What industries are present, and what degree of intelligence and education is required for employment in these industries? How prevalent are tuberculosis, syphilis, and other contagious diseases in the area?

(2) I keep up with the current medical topics, as well as being aware of the people's interests in the county.

(3) I feel morally obligated to answer and try to help any student who has questions regarding human sexuality. I believe these responses are important to our youth as they struggle to develop their system of values.

(4) I attempt to stay familiar with the school curriculum, to increase my ability to be of assistance in determining if a student's difficulty is physical and/or emotional.

(5) I encourage any unwed mothers to complete their education.

During my association with the Pupil Personnel Services Center, cases have been received from three sources: the teacher who suspects from the child's appearance or action that he is ill; other members of the staff at the Demonstration Center; and all students recommended for special education classes.

While evaluating the referred students from a physical point of view is my basic purpose in the project, this purpose becomes more evident during the professional staffings. During these staffings, the physical and psychological problems are brought into focus. Through these discussions, I realized that I was concentrating too much on the purely physical health of the student.

Identification and recommendation for treatment of dental, ophthalmological, and otological problems are essential. But, if we stopped here, many other problems would be overlooked.

Therefore, it is our responsibility to utilize one of our better sources of information — the teacher. We must make them familiar with characteristics of students who may be in need of services.

The student in need of these services is not only the boy or girl who shows a sudden drop in grades, or who develops headaches at specific times of the day or nausea when he enters a particular teacher's class. There are others, such as: the undiscovered epileptic who develops momentary loss of contact; the usually self-reliant student who begins to demand more undivided assistance; the athlete who ceases to participate in sports.

The number of hours spent with students could be multiplied by days, and still some of the 4,500 students in our county requiring attention would not be seen. Perhaps the continued cooperative work of our group at the Pupil Personnel Services Center will help circumvent some of our inadequacies.

From a practicing physician's point of view, the association with the students and working with their problems has been stimulating to me. I am more aware of the tempo at which the school is set, and the needs for students to be more healthy in terms of physical, emotional, and social well-being.

Demonstration

and

Dissemination

MR. WILLIAM D. OSBORNE

COORDINATOR OF DISSEMINATION

Pupil Personnel Services Demonstration Center

The dissemination aspect of the Pupil Personnel Services Center has a twin purpose. It seeks to inform various publics of the activities occurring in the project. Also, it attempts to demonstrate the value of incorporating an information role into an educational program.

First, let's consider the more obvious part of the purpose of our dissemination office. Various means have been used to disseminate information: newsletters, brochures, booklets, displays, meetings, visits to the project, speeches, and the news media. Most, perhaps all, of you have received our publications, so I will not describe them.

The publications have accomplished much in informing people of the Demonstration Center. Our mail reflects the impact of this dissemination effort — some letters requesting one or more publications, others expressing appreciation for receipt of a newsletter or booklet.

Dissemination activities have been varied and have involved every professional staff member. Participating on panels, speaking at professional meetings, talking to the PTA: all these are facets of dissemination.

Including you participants in this regional seminar, the Center has welcomed almost an even 1,000 visitors during the past 12 months. If that number seems insignificant, consider that Rockdale County has less than 4,500 students. One visitor for every 4½ students is significant, I believe.

One of the key segments of our dissemination emphasis is the building you visited earlier this afternoon. Although the term "Demonstration Center" refers to a program and not a place, the physical facility is very important. We call it a "model facility," and through it we are attempting to demonstrate several features which might aid considerably in pupil personnel services. Permit

me to recall three of these features.

The central dictation system provides the pupil personnel specialists with a means to reduce time spent on paper work. A desk speaker, connected to a central recording arrangement, enables the specialist to dictate information as needed. It is transcribed, with the reports being filed for future use.

The reading room contains a representative selection of books and other printed materials on each discipline represented on the Center's staff. The prime purpose of the reading room is to demonstrate what materials could be included in development of a library on pupil personnel services.

The closed circuit television system serves all purposes of the Title III project. With the video tape capability, we can provide visitors with a broad view of project activities. As you may recall, our conference room is equipped to facilitate demonstration of our activities and to disseminate information on the project.

The second part of the dissemination purpose in our project is to demonstrate the value of incorporating an information role into an educational program.

We in the Demonstration Center believe that whatever success our dissemination program has enjoyed has been due to three factors: what we communicate, how we communicate, and to whom we communicate. Sure, these are key factors in any communications program, but let's look briefly at each.

What we communicate: In our Title III project, we have made an honest effort to let people know what is taking place. I believe a key to our dissemination thrust has been the fact that I — as Coordinator of Dissemination — have been centrally involved in all of our programs. Fortunately, we do not have an arrangement where the only contact I have with the specialists is when a publication is being written. Anyone responsible for dissemination would be handicapped under such a procedure.

The "what we communicate" concept is based on a belief that if the dissemination component of the project is to inform people of what is occurring, it must be adequately informed itself.

How we communicate: Quite honestly, there are times in our staff meetings when I do not fully understand the discussion because my educational background and prior experiences were not in a pupil personnel services field. By the same token, if I started at this time to talk about some aspects of the printing process, most of you would have difficulty in understanding all of the implications.

But together, we can use our different fields of preparation to get the job done. This is why the "how we communicate" is important — not the different vehicles we use, but the way we use pupil personnel talents and journalism talents to develop publications meaningful to the different audiences we serve.

The dissemination office contributes to most activities in the project. For example, it was responsible for public information in the pre-school assessment program. It is responsible for having the forms printed, and for publishing reports on such activities as the standardized testing program.

To whom we communicate: From the beginning, our mailing list has been broad, to enable us to disseminate information to key local educators throughout Georgia and to many leaders in pupil personnel services nationwide. Also, we have attempted to communicate with our local community in several ways, including providing articles for the weekly newspaper, *The Rockdale Citizen*.

Community leaders receive our regular newsletter and other publications. To reach a larger community audience directly, I cooperate with the Elementary Counseling Specialist and the elementary school counselors in publishing a bi-monthly *Guidance Newsletter*. The School Social Worker and I prepared a *Community Services* booklet for use by our school faculties and various local community services agencies.

Our past dissemination responsibilities have prevented us from expanding local communications efforts. However, new Congressional regulations directing State Departments of Education to assume this role will free us to concentrate on the local school community.

Therefore, during 1969-70, we plan to focus our dissemination efforts within Rockdale County. We believe this is an excellent opportunity to demonstrate an effective program of communications within a school community — something which has been done all too infrequently in education in the past.

We recognize that the day is gone when a poorly printed mimeographed sheet can serve as a desirable communications vehicle. We believe there is demonstrative value to other school systems in our planning and implementing a local communications program that emphasizes the role of pupil personnel services in a local school system.

Pupil Personnel

Services —

The National View

DR. DONALD FERGUSON

ASSOCIATE DIRECTOR IRCOPPS

Dr. Donald Ferguson delivered the banquet address on Sunday night, April 27, 1969. The presentation was not recorded, and Dr. Ferguson was to provide a transcript at a later date. The transcript had not been received by the Demonstration Center before the booklet was sent to the printer for publication.

When Dr. Ferguson's address on *Pupil Personnel Services — The National View* is received, it will be reproduced by the Demonstration Center as an addendum to this publication.

Initiative in

School

Social Work

MR. JOHN BOYS

CHIEF SOCIAL WORKER

Child Adjustment Services

Toronto (Ontario) Board of Education

The function of the School Social Worker is determined by the skill and knowledge acquired from professional training, by the role the educational system will permit him to have, and by the need that is encountered. Those of you who have had the frustrating task of defining School Social Work will appreciate that there are variations on the theme from place to place and time to time. It is with some anxiety that I try to peek into the future out of the seeds of the present, in terms of School Social Work functioning.

I do not have to spend time warning you that we are in the midst of a period of serious social unrest. We are witnesses to and participants in a convergence of discontent on the part of individuals, groups, nations and races who have felt rejected, who are struggling to survive under conditions of severe disadvantage, who have little or no decision-making ability in the basic matters that affect their lives.

It is obvious that our social institutions have been slow, if not immovable, in responding to the need for social change. By and large, the very professionals whose commitment is to movement, growth, and change, have found themselves defending outmoded structures. There have been some voices in the land who have recognized that the tempo of social change has increased alarmingly.

Some advocate a basic position of anarchy — do away with all structure. Some return to the comforting theory of Rousseau — leave man alone and his innate goodness will emerge. I am no philosopher, but I find no comfort or satisfaction in such views. I cannot align myself with those who can see no further than the present irrelevance of present structures and think no further than to have them torn down quickly, apparently content to let the resulting vacuum attract whatever may rush in to fill it.

I do believe that some of our present structures need replacing.

I do believe some can become flexible and responsive. Basically, I think it is part of man's nature to build structures — sometimes he becomes so involved with the structure that he gives less and less importance to the need that it is supposed to meet. Then change is necessary. Those who are of this age, whom McLuhan defines as having an electric background as opposed to my own generation whom he defines as having a literary background, must be reached and have demonstrated to them that communication can take place.

I am particularly concerned with social work in education. I believe our concern must be as great for social structures, social policies, and social systems as it has been in the past for the psychodynamics for personality. There are two illustrations that I would like to share with you — two events that foreshadow things to come in the developing function of School Social Work.

In the large urban center of Toronto where I live and work, in an attempt to be responsive, our Board of Education has invented what are called *Inner City Schools*. Forty-four out of 108 schools are so designated. The designation is based on a formula derived from the local community based on average income, public housing, incidence of juvenile delinquency, economic and household characteristics. The formula when accepted for a particular school ensures that the designated school gets an increased budget which may be used for material resources and for extra teachers who may be compensatory and will, in effect, reduce the teacher-pupil ratio. Both of my illustrations are against this background.

The first illustration is related to an expressed problem of communication in an inner city school: Communication between teachers and particularly the grade 7 and 8 youngsters — the early adolescents in a culturally deprived area. The initiative of the School Social Work was in helping teachers organize a program called a *Drop-In Club*. It functioned as an evening project, once a week, staffed by teachers. The program had a voluntary study or tutorial period, then a recreational period for two hours involving both students and teachers as participants.

There were problems in helping teachers be participants, rather than teachers; but the success of the program has been enormous. It has led directly to the development of parent groups, which now have been organized into something with the improbable name of C.I.A. — *Community Improvement Association* — which is now defining its own needs and insisting on having a voice in the problem of delivery of service which I shall mention later.

The second illustration also involves an inner city school, one situated in the midst of a high rise development, probably close to two dozen buildings — half a dozen of which are low income, subsidized public housing. This is a kindergarten to sixth grade school. The Principal and School Social Worker became concerned about the lack of facilities in the local community for children whose parents worked. There were well over 100 so-called latch-key children roaming the development between the

hours of 3:30-6:00 p.m. Police records of delinquent occurrences and complaints from the developers regarding vandalism were soaring.

The School Social Worker took the initiative in organizing, with the major health and welfare agencies in the area, an after school day care center. The agencies provided personnel to sit on an Advisory Committee; a foundation gave a grant; the Board of Education agreed to have the school used as the physical facility; a program director was hired; volunteers were recruited from the University; and the program was launched.

Notice that there were no outraged parents involved in this process. This, like the first example, was the result of disciplined intervention. After the development of each of these programs, an interest began to develop — leaders in the community began to emerge from the previous apathy. Both programs spawned the growth of parental organizations. In the second illustration the community is now challenging the developers to work cooperatively around the development of human values in the community. The volunteers from the University are being replaced by high school students from the community. The project will soon belong, in every sense, to the community.

In both illustrations, there was a difference in function of the School Social Worker, moving away from direct casework service to children and parents to becoming a community agent, operating out of the school — a disciplined interventionist, a catalyst in the mobilizing of community concern.

The whole purpose of Social Work is to assist individuals, families, groups, institutions and communities achieve and maintain social functioning at a healthy, satisfying and effective level. Social Work has relied primarily on the use of human relationships of mutual understanding, trust and helpfulness. Few problems in social functioning can be resolved by one profession alone.

As the use of a purposeful relationship as a method of working is seen as a necessity by more and more professional groups, it seems to me that the Social Worker must be more ready to emphasize the word *S-O-C-I-A-L* in his title and develop competence for disciplined intervention, particularly in relation to the social structures within which individuals and families are obliged to function. Too long have we put our main efforts into helping individuals adjust to what is, rather than trying to change what is. Perhaps it is a renewal of the social action evident in the profession around the turn of the century.

In effect, the School Social Worker has a responsibility to try to help the institution of education become more flexible and responsive. Education not only reflects society but must take on the role of preparing individuals to live in, and to change society. The School Social Worker must become a specialist in working with, challenging, and intervening in the social structures of the environment.

In order to function, the School Social Worker must develop working relationships with the power structure of the community:

- (a) The locally elected representative to the educational authority.
- (b) The locally elected representative at the municipal level.
- (c) The State representative for that area.
- (d) The Federal representative for that area.

This concept meets with the resistance of Social Workers who are only comfortable in working with the dynamics of personality.

If we are to be effective in a society of change, we must take responsibility for the use of our skills in helping to develop leadership in our communities or in working with it where it exists already. We must give more than lip service to the concept that those in need of service must have a voice in determining the kind of service and the how of its distribution. We must reject the role of the officious, paternalistic bureaucrats who too often have thrust services on those in need in too often arrogant ways.

These are dangerous waters. In one of our inner city schools, as a group of parents began to develop their strengths, a mild confrontation occurred with the school administration. The latter won, but there will be more confrontations. Our School Social Workers will then truly be in the middle— helping agent employed by an administration, but committed to aiding the growth of the parent group voicing their need and discontent.

In a few of the projects in our school system, there seems to be developing the concept that the consumer of service can also be a giver of service as well. For example, some of the teenagers who are recipients of service at a secondary school are volunteers at the after school day care center. Or some of the mothers in our parent groups may operate as organizers and deliverers of hot lunches to senior citizens, or double as small day care practitioners for pre-school children.

The School Social Worker has an increasing obligation in this restless society to break away from his pre-occupation with the one-to-one relationship and become the community agent of the school, helping to make education a dynamic force for change in seeking out modifications of existing social structures and developing new patterns of social policy in the community.

We have begun discussions with major welfare agencies regarding the use of the school as a center for the delivery of service. This is a particular need in some of our areas. The C.I.A. to which I referred earlier has little confidence in health and welfare agencies. Through the initiative of the School Social Worker, it has a great deal of confidence in him and in the school and wants to see the delivery of service somehow related to the school.

This may put a strain on the relationships of the school with other health and welfare agencies. However, I am firmly convinced that the educational institution is capable of being flexible, dynamic and responsive to community need. It has the advantage, of course, because of school attendance laws, of being in touch with just about all of the community at any one time.

There is much pain in the confrontations that arise, but our experience has been that in those areas where our School Social Worker has taken his community agent responsibilities seriously,

the confrontations are more likely to generate some useful interaction and agreements rather than the heat and rage of frustration.

John Gardner, in his essay on *Self-Renewal: The Individual and the Innovative Society*, has made the cogent point that institutions, like society itself, must build in an innovative capacity; to renew themselves in ways that rely neither upon wholesale repudiation of the past, nor upon pre-occupation with past precedents.

I believe that the institution of education is, and will be, the most important social institution for the next few decades, and within it the School Social Worker has a responsibility for helping it to be innovative in relation to society, and to be an important agent in working with the social structures in the environment, so that each child and his family may be enriched in their lives in a truly democratic way.

School Psychology —
A Focus on Intervention
and Directions
in the Elementary School

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As the technological advances of this century have altered our life style as individuals, they have also collectively focused our attention toward the problems we face as a community. One of the most striking of these problems is the ever increasing premium we place on literacy and education. Without an education today, the majority of vocational opportunities are not only delayed, but are permanently closed and excluded to those who do not possess the minimum "union card" of a high school diploma. From our experience with public health programs, I hope we have learned that solutions lie in prevention, not in correcting the pathological condition itself.

As one individual closely involved in the educational process, I find the responsibility, as well as blame that is attributed to us, amusing but at the same time frightening. The responsibility of correcting the injustices, the neglects, the problems of past decades has been laid to the public school systems.

The family unit itself assumes too little responsibility. Pediatricians, psychologists, and sociologists long have indicated that the initial foundation of learning as well as self image and an ethical sense of right and wrong is established in the early years of life, from belonging to, and participating in, a family unit. Unfortunately, for certain large segments of our population, the family unit itself no longer exists.

This morning I would like to emphasize child development and individual differences as crucial components in the educational equation. This component, I fear, is forgotten many times in both educational theory and in its practice across school districts. The individual variability which each child brings to the process of education and his change across time requires more application in the practice of teaching.

Frequently following the psychological evaluation of a child,

pupil personnel specialists attempt to explain to a teacher as well as a child's parents how a particular child individually differs from his classmates or from theoretical norms or from the *average child* in terms of his development of intellectual, language or cognitive skills. With our emphasis on statistics, group averages and expectancies, many such experts compound the fallacy that the majority of children in a classroom are typical or average.

Let me emphasize that measures of central tendency or statistical data may have more direct relevance for adults than they can ever hope to have for children, particularly during their early elementary school years. One of the amalgamating factors that decreases adult variance is that adults share in common the experience of twelve years or more of education, as well as opportunity for interaction with larger groups of people as opposed to the more secular and delineated family environment of the child.

Not only are the experiences that children bring to school widely divergent, but there is an increasing amount of evidence that they also bring to school marked variability in the neurosensory processes which underlie the actual acquisition of learning. Particularly these differences in neurosensory capacities are apparent in the early years of elementary education when the formal language skills of reading and spelling are taught.

Briefly let us review recent developmental data that have direct relevance to teaching principles.

A. *Sex Differences.* Marked sex differences between boys and girls are evident at age six. These differences include female superiority in fine muscle motor control as well as a longer attention span and focus of concentration.

B. *Sensory Channels for Initial Language Tasks.* Visual learning situations are easier for girls whereas first grade boys (in a number of studies) are reported to learn better when the learning response includes motoric or tactile-kinesthetic sensory feedback information.

C. *Auditory-Visual Equivalences.* A number of children, perhaps constituting 15 to 40 per cent of all first graders, have difficulty in establishing auditory-visual equivalences which are the foundations of reading.

D. *Auditory Generalization.* Marked differences in auditory generalization are being found in children. This deficit in generalization, in part, stems from the amount and number of language experiences the child has had in his development. The most evident contrast for this difference is between ghetto or lower socio-economic children and middle and upper class children. The latter tend to receive significantly more verbal stimulation and feedback during the first four years of life.

E. *Inappropriateness of IQ Measures.* General intelligence measures while still remaining the most accurate predictor of early school success have been shown to be highly inappropriate for large numbers of children in the general population. Fed-

eral programs such as Head Start have produced varying results. Close analysis of the obtained results suggest that the initial gains brought about by stimulation programs disappear two years after the child is in school.

F. *Differential Reading Acquisition.* Reading level scores across grades demonstrate that the majority of children fail to gain a year in academic achievement level for each year that they spend in school, such that when the average child graduates from high school he is only reading on an eighth grade level. According to data from Eisenberg (1966), this ranges from a fifth grade average reading level for high school graduates from inner-city schools to an eleventh grade reading level in peripheral and private schools. Only a portion of this difference can be attributable to differences in general IQ measures. The remaining variance reflects our failure to reach or teach these children at critical stages.

G. *Critical Ages for Language Acquisition.* Schiffman documents the value of early recognition. When a child experiences difficulty in basic foundation skills of education; namely reading, spelling or writing, there is a law of diminishing return regarding intervention and correction. When children are identified by or at the end of the second grade regardless of remedial methodology or strategy, 85 per cent of these children within two years are able to continue without assistance with their regular class. When recognition is delayed till the end of the third grade, within two years 67 per cent of these children are up to their correct grade placement. When cognition and/or remediation is delayed until the seventh grade, only 15 per cent of these children ever are able to finish high school.

H. *Delinquency and Language Achievement Deficit.* Without implying cause and effect relationships, delinquency and academic achievement deficits are significantly correlated. Reading particularly turns out to be a failure situation for most children who subsequently end up delinquent.

I. *Hardcore Unemployed.* Statistics from Job Corps Centers indicate that one of the major obstacles preventing many hardcore unemployed from attaining work is such poor academic preparation that they cannot read, nor execute applications for employment. Job Corps training in the more successful of these centers has included emphasis on remedial reading and arithmetic. Such a list of developmental findings could continue through numerous volumes. All of these findings underscore the principle of individual differences and inconsistent response of children to instruction across time. More training and knowledge regarding child development must be brought to our classrooms.

This School Psychologist, along with the others of you here who operate as pupil personnel specialists, perhaps more appropriately should be called child development experts, if you do your job effectively and correctly. One description of your function is the responsibility to ensure that in the large educational factory the individual child is able to progress at his potential and

not at his marginal best.

Arthur Statls makes an important point (in an excellent book which should be required reading for all beginning elementary school teachers, *Learning Language and Cognition*, 1968). Dr. Statls points out that according to accepted learning theories, if the child can learn a spoken language, he should be able theoretically to learn to read that same language. Cogently, he asks why we have so many children who speak the language well but never effectively read. He points out and (I believe correctly.) that they fail to do so because the educational process has been unable to be gradual enough and consistent enough in the introduction of the components that build that language.

We allow a child six years at home with small numbers of other children around, some of which may serve as models and perhaps as teachers to the child. Somehow magically, when the child turns six, we expect him to be able to enter school with a group of 30 other children and quickly acquire a sight recognition vocabulary. Data indicate most if not all children can eventually acquire this skill; however, the method of learning is highly variable and may even be uniquely different for boys and girls.

There is no universally perfect procedure for teaching reading, but too many elementary teachers act as if they had discovered such a technique. The contributions of Birch, Chess and Thomas on *Temperament and Behavior Change in Children* (1968) would make us realize that slowness or quickness of reaction, individual productivity and capacity for immediate response are highly individualistic variables which are not accounted for by IQ or MA measurements.

The data obtained in teaching retardates to read under specialized conditions indicate that all children between the ages of six and nine could acquire a satisfactory word recognition foundation in reading if only we would provide them with the time and the individualized supervision to ensure the reinforcement of the correct learning response. Our failure to teach such skills universally during these early critical years of school is only compounded by our subsequent labeling of these children as "slow learners", "acting out delinquents", or "poorly motivated troublemakers" when they do not live up to our expectations in the fourth, fifth, and sixth grades.

What is known and what we could learn about children and their individual levels, changes, and development constitutes for us in this room the challenge of major impact. I can point out that data are published demonstrating that we can predict which children at kindergarten and first grade level will be referred subsequently up to pupil personnel specialists for services in third, fourth grade and above. If these children can be identified, it is our responsibility to correct or remediate that problem before it damages the learning potential of the child.

Most of us now have our hands full, merely handling the problems that we allowed to become problems several years ago and

now require our urgent attention. I can only cry out that this is a losing battle unless we start intervention programs now as at least a significant portion of our contribution to the educational process.

The School Psychologist brings to education a background and training in diagnosis. If this diagnostic skill is utilized only in placing labels on children and in not translating these labels into specific remedial methodologies that teachers can use in their classrooms, we are both inefficient and perhaps in the long run not needed. Although teachers may not use the same terminology as psychologists, they are able to spot and frequently in a majority of cases describe in accurate terms the child's deficit. By referral the teacher is requesting assistance and some direction as to what procedures can be utilized to allow a child to move along with the rest of his peers.

As many child development experts are indicating, what we are learning about special education techniques in the future may be used for all children. If we specifically talk about average children and their typical progress, we are referring at all times to a minority of the class. The majority of the class is either above this level and, therefore, wasting time with the procedures required of them; or, it is below the general level of teaching, so the child daydreams or worse and eventually comes to the attention of us in this room as a problem child.

Hopefully, as we train more School Psychologists and other pupil personnel specialists and as we can convince school districts to use these personnel within individual schools, we will see considerable change. School Psychologists cannot function from downtown offices and administrative buildings but must be in a day-to-day contact with the teachers with whom they will be working regarding children. Such placement is a new concept in the use of such personnel, and it is one that I hope you will carry back to your individual school districts.

If I may quote Dr. Richard Kicklighter two years ago at another conference here in Georgia: "If a School Psychologist saves only one child and makes him a productive tax paying adult rather than becoming a permanent ward of the state, he saves the state his eventual salary for 15 years." Each of us here, as child development experts, has a perpetual challenge to integrate our increasing knowledge regarding children and the processes by which they learn into educational practice.

Whither
Elementary Guidance
— or Whether?

DR. RAYMOND PATOUILLET

PROFESSOR
College of Education
University of South Florida

Dr. Raymond Patouillet delivered one of the presentations at the general session on Monday morning, April 28, 1969. The presentation was not recorded, and Dr. Patouillet was to provide a transcript at a later date. The transcript had not been received by the Demonstration Center before the booklet was sent to the printer for publication.

When Dr. Patouillet's address on *Whither Elementary Guidance — or Whether?* is received, it will be reproduced by the Demonstration Center as an addendum to this publication.

School

Health

Trends

DR. DORIS BRYAN

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Of course, I am impressed with the marvelous activities you are developing here and in your demonstration of one of the most over-used, over-worked phrases in modern professional jargon: *the team approach*. I must say you are a little behind the times because "confrontation" is now the order of the day in which we are "open ended" in our "dialogues."

The scope, functions and responsibilities of nursing grow with every new development in health research, technology and change in society.

For the next few minutes, I would like to talk about what's going on in the big wide world outside the Pupil Personnel Services Demonstration Center at Conyers, Georgia, and to mention a few of the current issues affecting school nursing as I see them in my many visits to School Nurses throughout the country and some that I have noted in the literature. Then, I will try to relate them to what I see, or have heard or read about your project here. I may be way out of line in my predictions; but if I am, blame it on where I come from.

I come from the San Francisco Bay area where we were about to slide into the Pacific Ocean last Thursday with an earthquake. We didn't — but instead held a party for 10,000 people at 5:00 a.m. in the morning in the Civic Center.

I will take the liberty of quoting generously from the proceedings of the American Association for Health, Physical Education and Recreation's National Council for School Nurses *Conference on New Dimensions in School Nursing Leadership* held in Washington, D. C., last summer, because the conference dealt primarily with new trends in school nursing, current research and change.

Changes In Education

Dorothy Tipple stated regarding changes in education: The

emergence of the middle school and the nongraded school, the development of pre-school programs, the advent of programmed instruction, the impact of new learning theories in curriculum development — these are among the dramatic changes in education which are of significance in School Health.

Another change is related to the administration of the School Health program within the framework of education. I refer to the movement to bring under one administrative head in each school system all of the so-called pupil services or pupil personnel services. It was identified early that School Health personnel, particularly the School Nurse, could function most effectively in a team approach.

One of the first teams was a medical one, composed of the School Physician, other medical and dental specialists, the School Nurse, and Dental Hygienist. Then health in the schools became allied with physical education, and we noted that health and physical education personnel frequently became an administrative unit. This administrative pattern is followed currently by many school districts. In the past few years, however, as more of the supportive services have been added in school districts, there has been a movement to coordinate these services through an administrator assigned to this specific task. So, the team approach is not new to nursing and you are surely in the fore with the pupil personnel approach.

Federal Legislation

Tipple goes on to say, among the more recent developments which are already affecting the role of the School Nurse are those spearheaded by Federal legislation. Douglass Cater points out that over the past 3½ years, the President has proposed and Congress has passed over 40 major measures for Federal aid to education and health. In the past 3½ years, the President has recommended and Congress has allocated more funds for education and health than in the previous history of American government. Today, more manpower — and more brain power — than ever before has been mobilized for the effort in these two vital areas of activity.¹

Some of the recent laws are particularly pertinent to School Health services. One of them is Public Law 89-749, known as the *Partnership for Health* law. Since this bill was passed in November, 1966, we have gotten underway with the tremendous task of organizing the multiplicity of health agencies so that comprehensive, continuing, family-centered health care can be provided to everyone.

The goal of this activity is well stated in *Education and Manpower for Community Health* by Hilary Fry in collaboration with William P. Shepherd and Ray H. Elling: "What is needed is the kind of coordination which will keep different groups from tripping over one another in providing health services in one area of health need, while other areas go untended; the kind of vision which can see the total health problem of a community; the kind of know-

¹ Cater, Douglass, "Comprehensive Health Planning: I. Creative Federalism." *American Journal of Public Health* 58:1023, 1968.

ledge which can establish criteria and evaluate programs according to these criteria; the leadership necessary to get the necessary services into the areas of need; the kind of persuasion that will convince special interest groups of the overriding importance of total health problems and the courage to meet such groups in contest if they put private interest above community interests."²

School Health personnel definitely should be involved in community health planning as representatives of a very important segment of the community both as providers of services and utilizers of community services. More effective coordination of community health services should facilitate the activities of the School Nurse as she works with children, their parents, and school personnel.

With increased emphasis on pre-school screening programs and adequate counseling of parents of pre-school children, and early correction of defects, there will be less need for all inclusive health screening programs when the child starts to school, but more need for improved communication and cooperation between community health programs and School Health programs. There should also be much more emphasis upon health education as to the how, why, and what is happening to children when they get good care and how they should expect adequate care.

The positive impact of the E.S.E.A. program is surely evident here; but in other places, there has been a negative utilization of funds for hurry-up, poorly planned health programs and the hiring of unqualified personnel to implement these programs. Registered nurses or practical nurses without community health training or experience have been pushed into these positions to "make pupils healthy." This is indeed unfair to pupils, schools, the "poor souls" themselves unprepared to do these jobs, and the entire cohort of dedicated, experienced, creative School Nurses who have maintained high professional standards throughout the years.

Health Manpower

The need for better use of the School Nurse's unique knowledge and skills is stressed constantly in groups of professional health workers and educators.

State legislation now requires School Nurses in California and in many other states to have education beyond the public health nurse preparation level, so there are fewer qualified School Nurses to fill these positions. Then, too, the increasing technical nature of the health field has made great demands on professional time.

In addition to school demands, there is an increased need for public health nurses in generalized public health nursing services. As a result of Medicare, home nursing programs are requiring more staff to meet urgent needs of the public (as are other population groups, including the acute and chronically ill). These programs will utilize not only more public health

² Fry, Hilary; Shepherd, William P.; and Elling, Ray H. *Education and Manpower for Community Health*. Pittsburgh: University of Pittsburgh Press, 1967, p. 57.

nurses, but various levels of staff, including registered nurses without public health preparation, licensed vocational nurses, and subprofessional aides, as well.

The implications of this situation are clear-cut. There will be fewer highly trained public health nurses to provide more complex services to greater numbers of people. This means, therefore, that any agency, including the school, must utilize to the greatest degree the public health nurse's abilities and skills, and must recognize that persons with various levels of training can make effective contributions as members of the School Health team.

In order to supplement meaningful health services for the hard-to-reach and lower socio-economic segments of our society — and with the Federal government applying a financial stimulus to provide more training and jobs for lower socio-economic groups — a force of competent workers must and can emerge. Subprofessionals can, with careful, creative supervision and training ease the burdens of the professional and perform many neglected and/or new services.

Because it was felt that the School Nurse could be the key person in the school to work with students, parents, and community agencies — acting as a liaison between the school and the home, interpreting school problems to parents and family needs to teachers and principals, and assisting parents in seeking adequate medical care for their children as well as themselves — the three-year project *Redirection of School Nursing Services in Culturally Deprived Neighborhoods* was begun in Oakland, California, in September, 1965 with the following three-fold purpose:

First, to determine if a planned program of personal contacts with parents by the School Nurse would increase parental action toward maintenance and promotion of the health of the school child and the prevention of illness; second, to determine if full-time non-nurse assistants could carry out, under supervision, specific routine functions ordinarily performed by qualified School Nurses, thereby leaving the nurse free to devote more time to parent counseling, parent education, and child supervision; and third, to determine if released time for the School Nurse would, in fact, be used for the exercise of higher knowledge and skills by the nurse.

The project began with a proposed list of activities. Early determination of the duties of the nurse assistant was essential in order to select the right person for the job. The nurse assistant wanted to know what was expected of her; the School Nurse to whom she was assigned needed to know what to expect from her; and school personnel needed to be oriented to this new person in the nurse's office.

These activities, all or a portion of which could be performed by the assistant, included maintenance of the nurse's office, participation in health appraisal activities, individual child health

Note: For more complete details, refer to Bryan, Doris S., and Cook, Thelma S. *The School Nurse Assistant: A Report on the Subprofessional Worker in A School Health Program*. California School Health Association Monograph Number 4, October 1966, upon which this paper is based.

supervision, record keeping, responsibility for health education materials, and others. The position of the nurse assistant has been a developing and a changing one. It can, therefore, be assumed that her activities will change with experience, new knowledge coming forth from the project, and overall program change in the school district.

Three nurse assistants were recruited to participate in the project. Between April 1965 and June 1966, they were provided with an initial 20 hours of formal in-service training and orientation in addition to four weeks of observation and participation in the school setting. Although this training was directed toward the acquisition of specific skills, proficiency was gained in the daily practice of these skills under the supervision of a skilled School Nurse.

An evaluation of the three nurse assistants was carried out each year of the study. In all areas, the three were found to be doing a better-than-satisfactory job; and in some areas, they were outstanding. They exercised good judgment in assessing the needs of students as they came to the health office; they understood and were able to carry out accident and emergency policy with desired skill and safety; and they sought help and guidance from the School Nurse as needed. There is evidence to indicate that a full-time nurse assistant can indeed carry out the routine functions assigned to her and that she would be a great asset in the total School Health program.

In summary, I would like to emphasize the "musts" for effective utilization of the nonprofessional:

1. There must be a clear distinction between professional and nonprofessional tasks.
2. A job description for the nonprofessional must be developed on the basis of what a person can do, not on what the nurse feels she would like to give up.
3. Careful selection and training of personnel is imperative.
4. Continuous supervision by professional staff, trained to supervise, is necessary.
5. There must be a continuing evaluation of the effectiveness of such assistance. And finally,
6. Adequate preparation of nursing staff and school personnel for the nonprofessional is essential.

New Roles For The School Nurse

And now for the School Nurse herself. She, in her new role, is supposed to be an evaluator, a health counselor, an interpreter, a consultant and an educator. And she is supposed to bring her unique knowledge and skills to all with whom she comes in contact. In your own demonstration project, you are identifying your common tasks as pupil personnel workers, but also your uniqueness.

Again, quoting from the Leadership Conference Proceedings: "The School Nurse's uniqueness lies in the following attributes: (1) A commitment to the practice of health as a quality of living. (2) The ability to apply nursing skills in dealing with individual health problems. (3) A broad community health approach working

through the medium of the educational institution.

I hope School Nurses are giving up the idea of having to be all things to all people. In the Delaware School Nursing Study, Dolores Basco is identifying children in high risk categories for nursing services. Profiles of students with health handicaps, the potential drop-outs and chronic absenteeism are being developed so that nursing intervention can be only for these students.

Follow-up procedures for children and families are being set-up in our district in accordance with Joy Cauffman's study of Los Angeles school children, which mean only two parent contacts of two different types are made for follow-up of health defects and, if possible, by two different people. For example, a contact to the parent via telephone by the School Nurse is followed by a parent interview at school by the teacher, counselor or principal regarding seeking care for a vision defect. The study implies that more contacts are not fruitful in relation to the costs of service and utilization of professional time. If only two contacts are made, many more students can be referred and the total result of outcomes of referrals is greater.

Another myth that is being dispelled is the dependence upon the importance of the home visit in relation to the outcome of referrals. Telephone calls are most effective and most acceptable to parents in urban communities. Conferences at school are next in importance. This has not been true to so great an extent in rural settings. But again, if money and time and personnel are factors in practice, these studies are significant in getting *parent action* — not for understanding the child's environment away from school. All of these trends in school nursing emphasize prevention of disease and the promotion of health.

Problems Along The Way

I have been discussing change, change, change, as it relates to School Health, and particularly School Nursing, and yet the sixty-four dollar question is how do you get people to change.

We tend to cling to the old and the familiar. We are influenced by vested interests in the community. We are influenced by the limitations of our own knowledge and experience. In some parts of the country, we are still doing "morning inspections," routine physical examinations, weighing and measuring every child and many other outdated procedures.

In many parts of the country, all pupil personnel services are being curtailed because of financial crisis in school districts. Pupil personnel services are influenced just as when we buy a new automobile. When we are affluent, we can buy all the accessories like chrome, fancy headlights, color and air conditioning; but when we are not so affluent, we buy the standard model. I am not saying this is right but it is reality.

And speaking of reality, I leave you with one wish as John Gardner, when Secretary of Health, Education and Welfare, stated so well in regards to services to children: I hope you are not bringing to the children of Rockdale County cut flowers; but that you are making them into sturdy, healthy young plants.

New Dimensions in Pupil Personnel Services

DR. WALTER LIFTON

COORDINATOR OF PUPIL PERSONNEL SERVICES
Rochester (New York) City School District

Dr. Lifton did not make a formal presentation at the Regional Seminar. Rather, his task was to call the participants' attention to the major questions being faced in the area of pupil personnel services.

The presentations were not recorded, and lack of a transcript of Dr. Lifton's comments prevents the inclusion of his cogent and well-received remarks.

The major questions being faced in the area of pupil personnel services came from a position paper developed by the National Association of Pupil Personnel Administrators, of which Dr. Lifton is president-elect. Dr. Lifton said anyone interested in learning more about the national organization's position on these issues can obtain a copy of the position paper from the organization.

STUDYING THE CHILD

Do the curiosity and imagination of pupils diminish as they progress through the school program? Why?

Why do children learn differently and how do we identify these individual learning characteristics so they can be taken into account in teaching?

How do we obtain more meaningful information on significant aspects of learning needs of normal and of exceptional children?

What is the etiology of learning problems?

How can we tell when the school is meeting the needs of children?

CHANGING TIMES

Does the present training of pupil personnel workers prepare them to help youth meet new problems as they arise?

What are other implications of the dynamic nature of our society for the preparation, role, and techniques of pupil personnel workers?

How can the pupil personnel worker serve most effectively in determining needed changes and their direction?

What should be his relationship with other school personnel in this function?

PREVENTIVE APPROACHES

How can these aspects of pupil personnel be made more effective?

What are appropriate techniques?

How does one identify the groups with which to work and the types of early help they need?

Can potential learning problems be detected at an early age?

DIFFERENTIAL APPROACHES

How can pupil personnel services contribute to an educational effort to provide such differential approaches as may be needed for boys and girls?

What differential approaches in pupil personnel are needed for these pupils?

What differential approaches are needed to meet individual differences with any broad classification of pupils such as those indicated above?

SOCIAL PROBLEMS

How does the role of the pupil personnel worker differ from that of the parent and from that of agencies outside the school?

How can he participate in marshalling effective community participation in meeting social problems?

SPECIALISTS VS. GENERALISTS

How distinctive will the future role of each of the services be?

Is there a need for a generalist as well as the various specialists?

Will there be a need for new kinds of personnel?

What is the meaning of this in terms of future training of pupil personnel workers?

What would be the effect on the functions of specialists and on the team approach?

PARA-PROFESSIONALS

What role, if any, can be played by support personnel such as aides and technicians in performing some of the duties now assigned to professional pupil personnel workers?

What are the advantages and disadvantages to the student?

What precautions are necessary to assure that students benefit and that inherent dangers are avoided?

CHANGES IN SCHOOL ORGANIZATION

What are the implications of these changes for the pupil personnel services?

What modifications in the organizational pattern of the pupil personnel services should accompany changes in school organization?

TECHNOLOGICAL ADVANCES

What part should the new technology play in the development of programs within the pupil personnel services?

What effect will computers and other new educational media techniques have on instruction and counseling?

How can closed-circuit TV be used in pupil personnel services?

EVALUATION

How can staff time and energy be most effectively directed?

What constitute valid criteria for the evaluation of pupil personnel staff and programs?

How can reliable measures of these criteria be obtained?

Future Directions for Pupil Personnel in the Southeast

DR. PAUL FITZGERALD

DIRECTOR OF PUPIL PERSONNEL SERVICES

Florida State Department of Education

Dr. Paul Fitzgerald spoke at the noon luncheon on Monday, April 28, 1969. The presentation was not recorded, and Dr. Fitzgerald was to provide a transcript at a later date. The transcript had not been received by the Demonstration Center before the booklet was sent to the printer for publication.

When Dr. Fitzgerald's address on *Future Directions for Pupil Personnel in the Southeast* is received, it will be reproduced by the Demonstration Center as an addendum to this publication.

SOUTHEASTERN
INVITATIONAL SEMINAR

PUPIL PERSONNEL SERVICES
DEMONSTRATION CENTER

April 27-28, 1969
Rockdale County
Conyers, Georgia

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